1	2	3	4
2.	Chelsea, Delhi	Community Care Centre & Support	Rs. 13,41,820/-
3.	MAR, Kundukulam Memorial Research & Rehabilitation Complex, Kerala	Community Care Centre & Support	Rs. 22,21,500/-
4.	Action India	Community Care Centre & Support	Rs. 11,89,240/-
5.	SFDRT, Pondicherry		Rs. 13,50,180/-

Statement-II

For Community Care Centres, financial grant of Rs. 19,48,740/- is given in the first year and Rs. 15,19,000/- is given in the subsequent years.

For School AIDS Education Programme a sum of Rs. 1,70,000/- is provided to cover 30 schools and this activity is undertaken in collaboration with State AIDS Control Society, Deptt. of Education and NGOs.

For running the Telephone Counselling Rs. 6,16,000 is given as financial assistance to the NGOs.

Costing pattern for each of the Targeted Intervention programme is

- Sex worker/Injecting Drug Users/ Men who have sex with men -Rs. 12,08,500/- for 1000 population size
- Truck Driver -Rs. 9,47,000/- for 10000 population size
- Migrants -Rs. 6,04,000/- for 2500 population size
- Street children -Rs. 6,87,000/- for 1000 population size

Doctors on study leave

†4535. SHRI MOTI LAL VORA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) the number of doctors who went abroad on study leave during the last three years from AIIMS and other Central Government run hospitals and the number of doctors out of them who have returned back;

†Original notice of the question was received in Hindi.

(b) the assistance being provided by Government for the study and the conditions in this regard;

(c) the action taken by Government against the doctors who have not returned back to the country so far; and

(d) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA) : (a) to (d) The information is being collected and will be laid on the Table of the House.

Corneal blindness

4536. PROF. M. SANKARALINGAM : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that the incidence of corneal blindness has been increasing rapidly;

(b) if so, the details thereof and the reasons therefor; and

(c) the various programmes and plans followed by Government to assess the status of corneal blindness from time to time?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA) : (a) No, Sir.

(b) and (c) Periodic surveys are conducted to assess causes of blindness. National survey (1986-89) indicated that corneal blindness accounted for 1.52% of blindness. Recent survey conducted in 2001-2002 indicated that only 0.9% blindness was due to corneal causes.

Research work in AIIMS

4537. MISS MABEL REBELLO : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether it is a fact that AIIMS doctors are unable to do research due to pressure of work;

(b) if so, the research that has been done in AIIMS during the last three years;

(c) the findings of these researches; and

(d) what way these researches have been useful to the people of the country?